MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 10/540544 **FILING DATE**

APPLICANT(S)

3/2/07 CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1		1		51						
2		1		1		1	52						
3		1		1			53						
4		1	1			1	54						
5		4	1				55						
6				5		4	56						
7				2		4	57						
8				3		4	58						
9						4	59						
10						4	60						
11						4	61						
12							62						
13							63						
14							64						
15							65						
16							66						
17							67						
18							68						
19							69						
20							70						
21							71						
22							72						
23							73						
24							74						
25							75						
26							76						
27							77						
28							78						
29							79						
30							80						
31							81						
32							82						
33							83						
34							84						
35							85						
36							86						
37							87						
38							88						
39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	1		3		1		TOTAL IND.						
TOTAL DEP.	10		17		31		TOTAL DEP.						
TOTAL CLAIMS	11		20		32		TOTAL CLAIMS						

PTO-1360

U.S. DEPARTMENT of COMMERCE